ENTRY BLANK M Entered previous May Show PLEASE TYPE OR PRINT Ms. Mr. Artist SARMIT 30 Warrensville Gr Rd. Tel. () Area Code Temporary Address _ City Street Tel. (Area Code Permanent address is in what county? Born in Cuyahoga County Yes X No Collaborator ____ If entries are not accepted or not sold: Artist will pick up entries at Museum. Museum should dispose of entries. Museum should ship entries to artist C.O.D. at this address:

The attached card at right will be returned to you as notification of acceptance or rejection by the last week in April.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed.

It is also understood that accepted entries will remain on exhibition until June 9, 1974.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Signature Samuelo Conarg

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1974 MAY SHOW
The Cleveland Museum of Art
Cleveland, Ohio 44106

Please keep address within this box for window envelope.

Name	Mrs Sarmite Grava
Address	4530 Warrensuille Chr Rd.
City & State	N. Randall, Ohio zip 44/28

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your notification of acceptance or rejection.

ACCEPTANCE OR REJECTION NOTICE

This is your only receipt to claim your object(s). This notification will be mailed to you following judging.

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